

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

10015225

## CLAIMS AS FILED - PART I

|   | (Column 1)      | (Column 2)   |
|---|-----------------|--------------|
| TOTAL CLAIMS  |                 |              |
| FOR   | NUMBER FILED    | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 24 minus 20 = * | 4            |
| INDEPENDENT CLAIMS  | 3 minus 3 = *   |              |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |                 |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

|   |             | (Column 1)                       |    | (Column 2)                         |     | (Column 3)    |
|---|-------------|----------------------------------|----|------------------------------------|-----|---------------|
| AMENDMENT A   | 12/6/06     | CLAIMS REMAINING AFTER AMENDMENT |    | HIGHEST NUMBER PREVIOUSLY PAID FOR |     | PRESENT EXTRA |
|   | Total       | *                                | 24 | Minus                              | **  | 24            |
|   | Independent | *                                | 3  | Minus                              | *** | 3             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |             |                                  |    |                                    |     |               |

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

| RATE      | FEE    |    | RATE      | FEE    |
|-----------|--------|----|-----------|--------|
| BASIC FEE | 150.00 | OR | BASIC FEE | 300.00 |
| X\$ 25=   |        | OR | X\$50=    |        |
| X100=     |        | OR | X200=     |        |
| +180=     |        | OR | +360=     |        |
| TOTAL     |        | OR | TOTAL     |        |

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 25=          |                | OR | X\$50=           |                |
| X100=            |                | OR | X200=            |                |
| +180=            |                | OR | +360=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

(Column 1)

(Column 2)

(Column 3)

|   |             | (Column 1)                       |  | (Column 2)                         |     | (Column 3)    |
|---|-------------|----------------------------------|--|------------------------------------|-----|---------------|
| AMENDMENT B   |             | CLAIMS REMAINING AFTER AMENDMENT |  | HIGHEST NUMBER PREVIOUSLY PAID FOR |     | PRESENT EXTRA |
|   | Total       | *                                |  | Minus                              | **  | =             |
|   | Independent | *                                |  | Minus                              | *** | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |             |                                  |  |                                    |     |               |

| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 25=          |                | OR | X\$50=           |                |
| X100=            |                | OR | X200=            |                |
| +180=            |                | OR | +360=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

(Column 1)

(Column 2)

(Column 3)

|   |             | (Column 1)                       |  | (Column 2)                         |     | (Column 3)    |
|---|-------------|----------------------------------|--|------------------------------------|-----|---------------|
| AMENDMENT C   |             | CLAIMS REMAINING AFTER AMENDMENT |  | HIGHEST NUMBER PREVIOUSLY PAID FOR |     | PRESENT EXTRA |
|   | Total       | *                                |  | Minus                              | **  | =             |
|   | Independent | *                                |  | Minus                              | *** | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |             |                                  |  |                                    |     |               |

| RATE    | ADDITIONAL FEE |    | RATE   | ADDITIONAL FEE |
|---------|----------------|----|--------|----------------|
| X\$ 25= |                | OR | X\$50= |                |
| X100=   |                | OR | X200=  |                |
| +180=   |                | OR | +360=  |                |